



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Goddard et al. Docket No.: 39780-2730P1C31  
Serial No.: 09/997,440 Group Art Unit: 1647  
Filing Date: November 15, 2001 Examiner: Wegert, Sandra L.  
For: **SECRETED AND TRANSMEMBRANE POLYPEPTIDES AND  
NUCLEIC ACIDS ENCODING THE SAME**  
**EXPRESS MAIL LABEL NO. EL 992 478 814US**  
Date Mailed: July 5, 2005

**PRELIMINARY AMENDMENT**

MS: RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This Preliminary amendment accompanies a Request for Continued Examination (RCE) under 37 CFR § 1.114 for the above identified application. A Notice of Appeal was filed in this case on January 18, 2005; therefore this response timely filed and is accompanied by a Petition for Extension of time for four months with necessary fees. Entry of this amendment and consideration of the following arguments is respectfully requested.

**Pending Claims** are reflected in the listing of claims that begins on page 2 of this paper.

**Remarks/Arguments** begin on page 5 of this paper.

BEST AVAILABLE COPY

17/08/2005 CCHAU1 00000049 081641 09997440  
12 FC:1254 1590.00 DA

07/26/2005 GDUCKETT 00000005 081641 09997440  
01 FC:1201 600.00 DA

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2001

Application or Docket Number

2730PIC31

**CLAIMS AS FILED - PART I**

|                                  | (Column 1)               | (Column 2)   |
|----------------------------------|--------------------------|--------------|
| TOTAL CLAIMS                     | 3                        |              |
| FOR                              | NUMBER FILED             | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS          | 3 minus 20 =             | 0            |
| INDEPENDENT CLAIMS               | 2 minus 3 =              | 0            |
| MULTIPLE DEPENDENT CLAIM PRESENT | <input type="checkbox"/> |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

ACE

|  | (Column 1)                       | (Column 2)                         | (Column 3)    |
|--|----------------------------------|------------------------------------|---------------|
| AMENDMENT A                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total  | 11                               | 13                                 |               |
| Independent                                    | 6                                | 3                                  | 9             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |                                    |               |

| SMALL ENTITY TYPE <input type="checkbox"/> |        | OR OTHER THAN SMALL ENTITY |        |
|--|--------|----------------------------|--------|
| RATE                                       | FEE    | RATE                       | FEE    |
| BASIC FEE                                  | 370.00 | BASIC FEE                  | 740.00 |
| X\$ 9=                                     |        | X\$18=                     |        |
| X42=                                       |        | X84=                       |        |
| +140=                                      |        | +280=                      |        |
| TOTAL                                      |        | TOTAL                      | 740    |

| SMALL ENTITY     |                | OR OTHER THAN SMALL ENTITY |                |
|------------------|----------------|----------------------------|----------------|
| RATE             | ADDITIONAL FEE | RATE                       | ADDITIONAL FEE |
| X\$ 9=           |                | X\$18=                     |                |
| X42=             |                | X84=                       | 600            |
| +140=            |                | +280=                      |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE           |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)    |
|--|----------------------------------|------------------------------------|---------------|
| AMENDMENT B                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total  |                                  |                                    |               |
| Independent                                    |                                  |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |                                    |               |

| SMALL ENTITY     |                | OR OTHER THAN SMALL ENTITY |                |
|------------------|----------------|----------------------------|----------------|
| RATE             | ADDITIONAL FEE | RATE                       | ADDITIONAL FEE |
| X\$ 9=           |                | X\$18=                     |                |
| X42=             |                | X84=                       |                |
| +140=            |                | +280=                      |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE           |                |

|  | (Column 1)                       | (Column 2)                         | (Column 3)    |
|--|----------------------------------|------------------------------------|---------------|
| AMENDMENT C                                    | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total  |                                  |                                    |               |
| Independent                                    |                                  |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/>         |                                    |               |

| SMALL ENTITY     |                | OR OTHER THAN SMALL ENTITY |                |
|------------------|----------------|----------------------------|----------------|
| RATE             | ADDITIONAL FEE | RATE                       | ADDITIONAL FEE |
| X\$ 9=           |                | X\$18=                     |                |
| X42=             |                | X84=                       |                |
| +140=            |                | +280=                      |                |
| TOTAL ADDIT. FEE |                | TOTAL ADDIT. FEE           |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

BEST AVAILABLE COPY